

# Office of the State Superintendent of Education

# NASAL-BASED TEST FOR CORONAVIRUS (COVID-19) INFORMATION AND OPT-OUT FORM

Issued: Jan. 5, 2022

The information provided below and the form included with this document are intended to provide District of Columbia (District) students and families with critical information regarding COVID-19 universal testing protocols in DC Public Schools and public charter schools and provides the ability to opt out of or refuse nasal-based testing. Note that schools may utilize saliva-based testing; there is a separate form that must be completed to opt-out of saliva-based testing. This form shall not be used for an opt out of saliva-based testing.

The Centers for Disease Control and Prevention (CDC) recommends offering COVID-19 testing in schools, particularly during times of substantial community transmission. COVID-19 testing helps schools identify cases of COVID-19 quickly and reduce the risk of COVID-19 transmission at school. For the 2021-22 school year, your student's school is participating in a testing program that utilizes a nasal swab.

Generally, there are two types of tests that may use a nasal swab to collect a specimen. First, is a rapid antigen test, which uses a process to detect if there are COVID-19 viral particles in a sample. Second, is a polymerase chain reaction (PCR) test which identifies viral genetic (RNA) material for presence of the virus. You can learn more about these tests here. With either test, results will be shared securely and exclusively with the student's parent/guardian (or the adult student directly), the appropriate school official(s), and DC Health.

DC public and public charter schools participating in a testing program that utilizes a nasal swab are using this form to share information about the testing program with you and your student and to share data with relevant authorities. All testing is free.

These tests can be used for symptomatic or asymptomatic testing. Asymptomatic testing seeks to identify COVID-19 even if a person does not have symptoms of COVID-19. This type of asymptomatic screening testing is being conducted in the District's schools to quickly identify and isolate positive cases, as well as to understand the spread of COVID-19 in schools. It is an effective method for slowing the spread of the disease and may assist in identifying potential outbreaks early. Asymptomatic testing also includes the testing of close contacts of a positive case of COVID-19. Symptomatic testing is done if a student develops symptoms of COVID-19 while at school. The use of these tests greatly benefits students, parents, and the community by preventing further spread of the virus and keeping schools open for in-person learning.

A school's testing program includes both asymptomatic and symptomatic testing as well as different types of nasal based tests, whether rapid antigen or PCR. All of these tests are safe and effective and helpful in keeping our school communities safe from the spread of COVID-19.

## IN WHAT INSTANCES COULD A COVID-19 TEST BE ADMINISTERED?

There are many instances where taking a test to detect COVID-19 may be advisable. One such instance may include following a prolonged period of school closures; for example, after a school winter or spring break. Schools may recommend that students take a test before returning to school. After consulting with their own legal counsel, schools may consider requiring proof of a negative COVID-19 test after a school break period. Schools also regularly conduct randomized asymptomatic testing on a regular basis of a sample of the student population each week.

Individuals experiencing symptoms of COVID-19 should test for the virus. These symptoms include but are not limited to fever, cough, headache, fatigue, breathing difficulties, and loss of smell and taste.

Testing is also recommended for individuals who are not experiencing symptoms. These individuals may include unvaccinated individuals but also any individual who may have been identified as a close contact, has a sick household member, traveled outside of the District of Columbia, Maryland, or Virginia, been in congregate eating or living situations, or in a healthcare setting, even if they are vaccinated.











#### WHAT ARE THE TESTING PROGRAMS?

- Return to School Testing: This testing would take place after schools have been closed after a prolonged break, for example, after the holiday season and return to school in January.
- Asymptomatic Testing: The student may be selected as part of a random sample of individuals weekly to receive a test for the COVID-19 virus or asymptomatic tests given to the entire school population.
- **Close Contact Testing:** If the student is identified as a close contact of an individual who has COVID-19 in the school setting, the student would be eligible for COVID-19 testing (if offered by the school) after the exposure.
- Symptomatic Testing: The student will be eligible to complete a COVID-19 test if the student develops symptoms of COVID-19 at school.

## HOW AND WHEN WILL I FIND OUT ABOUT THE RESULTS OF THE TEST?

Rapid antigen test results are usually available in just over 15 minutes. PCR tests are analyzed at a laboratory and can take two to three days to process.

#### WHAT SHOULD I DO WHEN I RECEIVE MY STUDENT'S TEST RESULTS?

If the student's test results are negative, it means that the virus was not detected in the student's specimen at this time. The student should continue masking, using proper hygiene and practicing physical distancing recommended by DC Health. Students must follow all guidance from DC Health and your school regarding when your student can return to school, and parents/guardians should consult with their healthcare provider about treatment of any symptoms, if the student:

- Had a negative test result but is symptomatic;
- A close contact of an individual who tested positive for COVID-19;
- Has a sick household member; or
- Traveled to any place other than DC, Maryland, or Virginia.

If the student's test results are positive, it means the student has the virus and could spread it. Please contact the student's healthcare provider immediately. The student must stay at home and follow the DC Health Guidance for Schools and any additional guidance from your school about returning to school. If the student is on-campus when the test result is received, they will be taken to an isolation area until they can be picked up from school.

# WHAT ARE SOME OF THE POTENTIAL RISKS AND BENEFITS OF A COVID-19 TEST USING A NASAL SWAB?

Potential risks of testing include:

- As with any laboratory test, there is a small risk of inconclusive or false negative results.
- A nasal swab can be uncomfortable and complications can occur during sample collection.

Potential benefits of testing include:

- The result, along with other information, can help parents, guardians, or students make informed decisions about a child's care.
- The results of this test may help limit the spread of COVID-19 to family members and others.

## LIABILITY

The District, the school, its employees, and agents shall be immune from civil liability for acts or omissions relating to the District's citywide COVID-19 testing program, except for criminal acts, intentional wrongdoing, gross negligence, or willful misconduct.











#### **DATA AND REPORTING**

Data from this form and the results of tests will be collected as part of the COVID-19 reporting requirements and may be shared with relevant school and health authorities. The student's identity will not be released to others from the school community if they test positive for COVID-19.

#### **HOW DO I OPT OUT OF NASAL-BASED TESTING?**

You must fill out and return the opt-out form on the next page for your student (or you, if you are a student older than age 18) if you wish to opt-out of a nasal-based test. Return the form to your child's school. Your opt-out will be recorded and your student will not be selected or eligible for a nasal-based test. This opt-out form is valid for the 2021-22 school year, but you may revoke your opt out at any time. Just send a written letter or email to your student's school stating that you would like your student (or you, if you are a student older than age 18) to receive COVID-19 testing.

# DOES SIGNING THIS OPT-OUT FORM MEAN I AM NO LONGER REQUIRED TO PROVIDE A NEGATIVE COVID-19 TEST BEFORE RETURNING TO SCHOOL?

The primary use of this form is to opt out of the administration of a nasal based test for COVID-19 by a school official or agent. Schools and local education agencies determine whether this form stands in lieu of a negative COVID-19 test to return to school.









# NASAL BASED TEST FOR COVID-19 OPT-OUT FORM

This form shall be used to specifically refuse or withdraw consent for and opt-out of any nasal-based COVID-19 test (rapid antigen or PCR) in schools, whether for symptomatic or asymptomatic testing.

Contact Information   Completed by parent/guardian/student (if 18 years of age or older)					
tudent Last Name: Student First Name:		rst Name:		Date of Birth:	
School Name:			Ward:		
Home Address:	Apt:	City:	State:	ZIP:	
Parent/Guardian Name: Phone:			Email:		
Emergency Contact Name:	Emergency Contact		ct Phone:	Phone:	
By signing below, I attest that:					
<ul> <li>I have read and understand the information provided as it relates to nasal-based COVID-19 testing, including the risks and benefits of nasal testing, and refuse to provide consent for my student (or for myself if I am 18 years of age or older) to be tested for COVID-19 infection using a nasal based test in this COVID-19 testing program.</li> <li>My refusal to consent solely and exclusively relates to the nasal swab testing described herein and not for any other routine saliva-based COVID-19 testing or screenings taking place during the 2021-22 school year.</li> <li>My refusal is valid for the 2021-22 school year unless I notify the designated contact person from my student's school in writing that I provide my consent.</li> <li>I have signed this form freely and voluntarily, and I am legally authorized to make decisions for the student named above (or for myself if I am a student 18 years of age or older).</li> <li>I understand that COVID-19 is a contagious disease with symptoms including fever, cough, headache, fatigue, breathing difficulties, and loss of smell and taste. The virus has been tied to hospitalization, serious illness, and even death.</li> <li>I understand that if I am a student age 18 or older, I may legally consent for my own healthcare, and references to "my student" refer to me. I understand that I may sign this form on my own behalf.</li> </ul>					
PARENT/GUARDIAN CONSENT SIGNATURE (IF STUDENT IS UNDER 18	8 YEARS OF AGE)		DATE (MM/I	DD/YYYY)	
IGNATURE OF STUDENT (IF 18 YEARS OF AGE OR OLDER)		DATE (MM/DD/YYYY)			









